

Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 1-31-2013

Address: 2040 COPPERLINE RD

Case #: PO 13-007D

MT VERNON IN

County: Posey

47620

Type of Laboratory Seizure (check one)

- ☐ Operational Lab
☒ Chemical/Glassware/Equipment (only)
☐ Dumpsite (only)

Seizure Location (check all that apply)

- ☐ Residence
☐ Outbuilding
☐ Vehicle
☐ Hotel/Motel
☒ Open - No Structure
☐ Other: _____

Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

☒ Lithium/Ammonia Reaction(s): 7 WHOLE BATTERIES

☐ Red Phosphorous/Iodine Reaction(s): _____

☒ Flammable Solvents: SOLVENT IN CAN

☐ Water Reactive Metal (Lithium): _____

☒ Anhydrous Ammonia: IN PORTABLE TANK

☐ Hydrochloric Acid Gas Generator(s): _____

☐ Corrosive Acid: _____

☐ Corrosive Base: _____

☐ Other (item and location): _____

Child under age 18 discovered (check one)

- ☐ Yes _____ (number present)
☒ No

*If yes, fax report to Child Protective Services

Investigative Information

- ☐ Ephedrine/Pseudoephedrine Tracking Log
☐ Retail/Merchant Tip
☒ Other: DISPATCH

This report is to be faxed to the following agencies that serve the location:

Fire Department: BLACK TOWNSHIP

Fax: _____

Health Department: Posey County Health Dept

Fax: 812-838-8561

Fax: _____

Child Protection Service: N/A

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: G. R. BOYSTER Phone 812-838-8675

** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

*** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.